Effective October 1, 2000														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS 3/					3. ""		R/	TE	FEE		RATE	FEE		
FO	Residence of the second		NUMBER FILED		NUMBER EXTRA		BASI	BASIC FEE		OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS _ 3/ minus					• //	X\$	X\$ 9= 99		OR	X\$18=				
INDEPENDENT CLAIMS // minus 3 =					* /	X	X40= 4		OR	X80=				
MULTIPLE DEPENDENT CLAIM PRESENT							+1:	35=	·	OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in co						olumn 2	<u> </u>		494	OR	TOTAL			
CLAIMS AS AMENDED - PART II										•	OTHER THAN			
		(Column 1) CLAIMS	(Column 2) (Column 3)					ALL	ENTITY	OR I I	SWIALL			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	XS	9=		OR	X\$18=			
	Independent	*	Minus	***	T OL AINA	=	X40=			OR	X80=			
<u>L</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	35=		OR	+270=	1		
								OTAL T. FEE		OR	TOTAL ADDIT, FEE			
	(Column 1) (Column 2)					(Column 3)		I. FEE			ADDIT: 7 CC			
IENDMENT B		CLAIMS		HIG	HEST MBER		] [		ADDI-		<u> </u>	ADDI-		
		REMAINING AFTER AMENDMENT		PREV	OUSLY FOR	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL FEE		
	Total	*	Minus	**		=	X	S 9=		OR	X\$18=			
AME	Independent	*	Minus	***	T 01 4114	=	X	40=		OR	X80=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	35=		OR	+270=			
							TOTAL		OR	TOTAL				
Ì	(Column 1) (Column 2) (Column 3)							T. FEE	<u> </u>	] • · ·	ADDIT. FEE	<u> </u>		
I		CLAIMS		HIG	HEST	1	ጎ		ADDI	1		ADDI		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=	X	S 9=		OR	X\$18=			
AME.	Independent	•	Minus	***		=	]   x	40=		OR	X80=			
JĽ	FIRST PRESENTATION OF MULTIPLE DEPENDENT				IT CLAIN		J ├─		<del>                                     </del>		<b>-</b>	<b> </b>		
* If the order is column 4 is less than the order is column 2 write 90° is column 2										OR	+270=			
	If the "Highest Nu *If the "Highest Nu	mber Previously I	Paid For IN THI	S SPACE	is less tha	an 20, enter "20		TOTAL T. FEE		OR	TOTAL ADDIT. FEE			
Į.		nber Previously P					er found ir	the a	propriate bo	x in co	olumn 1.			

Application or Docket Number